## Case 3:18-bk-33581 Doc 1 Filed 11/27/18 Entered 11/27/18 11:10:19 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Chelsea First name  Lynn Middle name  Blundell Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6804	

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Debtor 1 Chelsea Lynn Blundell

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	1222 C. Didge Avenue	If Debtor 2 lives at a different address:
		1232 S. Ridge Avenue Troy, OH 45373 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Miami	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Chelsea Lynn Blundell

Case number (if known)

Par	t 2: Tell the Court About	Your B	ankruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing te box.	for Bankruptcy
	choosing to file under	■ Cl	hapter 7				
		□ Cl	hapter 11				
		□ Cl	hapter 12				
		□ ci	hapter 13				
			·				
3.	How you will pay the fee		about how yo	y the entire fee when I file my petition. Please check with the clerk's office in your local court for now you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's chec your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or inted address.			
						on, sign and attach the Application for Ir	ndividuals to Pay
			ŭ		s (Official Form 103A). <b>rived</b> (You may request this option	on only if you are filing for Chapter 7. By	law a judge may
			but is not req applies to you	uired to, waive y ur family size ar	your fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee i	our income is less than 150% of the offic n installments). If you choose this option cial Form 103B) and file it with your peti	ial poverty line that n, you must fill out
9. Have you filed for bankruptcy within the last 8 years?							
	idot o years.	<b>—</b> те	District		When	Case number	
			District			0	
			District		When	Case number	
			Diotriot		When	Odde Humber	
10.	Are any bankruptcy cases pending or being	■ No	)				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No	Go to I	ine 12.			
	residence?	■ Ye	. Has yo	our landlord obta	ained an eviction judgment agains	st you?	
		_ 16	·	No. Go to line	12.		
			_			ludement Aminet Veu (Form 404A)	d filo it with this
				bankruptcy pet		Judgment Against You (Form 101A) and	a iiie it with this

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Debtor 1 Chelsea Lynn Blundell Case number (if known)

art	3: Report About Any Bu	sinesses	You Own	as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busi	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name				
If you have more than one sole proprietorship, use a separate sheet and attach					e & ZIP Code		
	it to this petition.				x to describe your business:		
					ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure					
		■ No.	I am n	ot filing under Chap	ter 11.		
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Ba				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
art	4: Report if You Own or	Have Any	/ Hazardo	us Property or Any	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	■ No.	What is t	he hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs		If immed	iate attention is			
	immediate attention?		needed,	why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1 Chelsea Lynn Blundell

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 3:18-bk-33581 Doc 1 Filed 11/27/18 Entered 11/27/18 11:10:19 Desc Main Document Page 6 of 56 Case number (if known) Debtor 1 Chelsea Lynn Blundell Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Chelsea Lynn Blundell Signature of Debtor 2

Executed on

Chelsea Lynn Blundell Signature of Debtor 1

Executed on November 27, 2018

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Debtor 1 Chelsea Lynn Blundell

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	pher L. Wesner Attorney for Debtor	Date	November 27, 2018 MM / DD / YYYY
Christoph Printed name	er L. Wesner 0082699		
Miller, Lur	ing, Venters & Wesner Co., LPA		
314 W. Ma			
Contact phone	937-339-2627	Email address	chriswesnerlaw@gmail.com
0082699 C			

		DOCUM	eni Pade 8 oi 50	<u> </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Chelsea Lynn Blu	ındell			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number _					Check if this is an
					amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,549.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,549.00
Par	t 2: Summarize Your Liabilities		
			abilities : you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	11,243.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	489.10
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	73,566.57
	Your total liabilities	\$	85,298.67
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,978.99
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,927.22
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
	■ Yes		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Chelsea Lynn Blundell

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,675.90

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	489.10
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	49,926.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	50,415.10

		Documen	r Page 10 of 56		
Fill in this	information to identify you	r case and this filing:			
Debtor 1	Chelsea Lynn B First Name	lundell  Middle Name	Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	SOUTHERN DISTRICT OF	OHIO		
Case numb	er				☐ Check if this is an
					amended filing
Official	Form 106A/B				
Sched	dule A/B: Prop	perty			12/15
hink it fits be	est. Be as complete and accur If more space is needed, attac	rate as possible. If two married p	e. If an asset fits in more than or beople are filing together, both a On the top of any additional pag	re equally responsible for su	pplying correct
Part 1: Des	scribe Each Residence, Buildin	ng, Land, or Other Real Estate Yo	ou Own or Have an Interest In		
. Do you ow	vn or have any legal or equitab	ole interest in any residence, buil	lding, land, or similar property?		
■ No. Go	to Part 2.				
☐ Yes. W	here is the property?				
Part 2: Des	cribe Your Vehicles				
	•	cle, also report it on Schedule	G: Executory Contracts and U	nexpired Leases.	
3.1 Make		Who has an interest	in the property? Check one	Do not deduct secured cla	
Mode	•••	Debtor 1 only		Creditors Who Have Clair	
	oximate mileage:	☐ Debtor 2 only ☐ Debtor 1 and Deb	•	Current value of the entire property?	Current value of the portion you own?
Other	r information:	At least one of the	debtors and another		
		Check if this is constructions)	ommunity property	\$8,000.00	\$8,000.00
Examples  No  Yes  Add the pages y  Part 3: Des	e: Boats, trailers, motors, personal and House in Section 2015	sonal watercraft, fishing vessel you own for all of your entri Write that number here	vehicles, other vehicles, and is, snowmobiles, motorcycle action is from Part 2, including any collowing items?	y entries for	\$8,000.00  Current value of the portion you own?
	old goods and furnishings				Do not deduct secured claims or exemptions.
Example	es: Major appliances, furnitur	e, linens, china, kitchenware			

□ No
Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Document Page 11 of 56  Chelsea Lynn Blundell  Case number (if known)	
■ Yes	Describe	
	Furniture, washer/dryer, misc. household items	\$800.00
□ No	les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games  Describe	
	Television, DVD player, stereo, computer	\$1,000.00
Examp ■ No	ibles of value  les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, co other collections, memorabilia, collectibles  Describe	in, or baseball card collections;
Examp ■ No	nent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments  Describe	s and kayaks; carpentry tools;
■ No	ms  ples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	
□ No	ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe	
	Wearing Apparel	\$200.00
☐ No	ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems  Describe  Jewelry	, gold, silver \$ <b>300.0</b> 0
<i>Exam</i> □ No	arm animals ples: Dogs, cats, birds, horses  Describe	
	One dog and one cat	\$0.00
■ No	ther personal and household items you did not already list, including any health aids you did not list  Give specific information	
15. <b>Add</b>	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$2,300.00

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Chelsea Lynn Blundell Debtor 1 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes Cash \$200.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... Chase Bank - Wages only \$999.00 17.1. Checking **Chase Bank** \$50.00 17.2. Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

De	ebtor 1	Case 3:18-bk-3		Doc 1	Filed 11/27/ Document	18 Entered 1 Page 13 of 56	1/27/18 11:10:19 Gase number (if known)	Desc Main
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25.	■ No	s, equitable or future  Give specific informa			(other than anythin	ng listed in line 1), an	d rights or powers exerci	sable for your benefit
26.		ts, copyrights, trader				ual property and licensing agreeme	nts	
	☐ Yes.	. Give specific informa	ation about	them				
27.	Exam ■ No		, exclusive	licenses, co		n holdings, liquor licen	nses, professional licenses	
	☐ Yes.	. Give specific informa	ation about	them				
M	oney or	property owed to yo	ou?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you						
	□ No	0						
	■ Yes.	. Give specific informa	ition about t	them, includ	ding whether you aire	eady filed the returns a	nd the tax years	
							$\neg$	
				2018 T	ax Refund		Federal	\$0.00
29.	Exam ■ No	y support  pples: Past due or lump  Give specific informa		ony, spousa	al support, child supp	ort, maintenance, divo	rce settlement, property se	ttlement
30.	Exam  ■ No	amounts someone couples: Unpaid wages, coupled benefits; unpaid	disability ins Lloans you			nefits, sick pay, vacatio	on pay, workers' compensa	tion, Social Security
		•						
31.		sts in insurance polic oples: Health, disability		urance; hea	alth savings account (	(HSA); credit, homeow	rner's, or renter's insurance	
	☐ Yes.	. Name the insurance	company o Company		ey and list its value.	Beneficia	ary:	Surrender or refund value:
32.	If you	nterest in property th are the beneficiary of one has died.					currently entitled to receive	e property because
	_	. Give specific informa	ation					
33.	Exam ■ No	oples: Accidents, emplo				it or made a demand s to sue	for payment	
	⊔ Yes.	. Describe each claim	1					
34.				laims of ev	ery nature, includir	ng counterclaims of the	he debtor and rights to se	et off claims

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Case number (if known) Document Debtor 1 Chelsea Lynn Blundell 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,249.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ■ No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6 If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 ..... \$0.00 56. Part 2: Total vehicles, line 5 \$8,000.00

57.	Part 3: Total personal and household items, line 15	\$2,300.00		
58.	Part 4: Total financial assets, line 36	\$1,249.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$11,549.00	Copy personal property total	\$11,549.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$11.549.00

Official Form 106A/B Schedule A/B: Property page 5

		17000000	111 FAUE 1.3 01.3	
Fill in this infor	mation to identify your	case:		
Debtor 1	Chelsea Lynn Blu	ındell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number _				
(if known)				☐ Check if this is an
				amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$8,000.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
		100% of fair market value, up to any applicable statutory limit	2020.00(/1)(2)	
\$800.00		\$800.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
		100% of fair market value, up to any applicable statutory limit	2020.00(A)(A)(A)	
\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
		100% of fair market value, up to any applicable statutory limit	( // /	
\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
		100% of fair market value, up to any applicable statutory limit	2020:00(-1)(-1)(0)	
\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
		100% of fair market value, up to any applicable statutory limit		
	\$8,000.00 \$1,000.00 \$200.00	\$8,000.00	Standard Schedule A/B  \$8,000.00  \$8,000.00  \$0.00	

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Deb	otor 1 Chelse	a Lynn Blundell	Document	Г	Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash	edule A/B: <b>16.1</b>	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
					100% of fair market value, up to any applicable statutory limit	
		hase Bank - Wages only	\$999.00		\$225.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
	LITE HOTH SCHEdule AVB. 11.1				100% of fair market value, up to any applicable statutory limit	2020:00(1)(0)
	_	hase Bank - Wages only	\$999.00		\$774.00	Ohio Rev. Code Ann. § 2329.66(A)(13)
	Line from Goriedule PVD. 17.1				100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
	Savings: Ch		\$50.00		\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Line from Schedule A/B: 17.2				100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)
		eral: 2018 Tax Refund \$0.00			\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
LII	Line from Gene	Saule 7/ B. <b>20.1</b>			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
3.	(Subject to adj	ing a homestead exemption ustment on 4/01/19 and every 3			led on or after the date of adjustmen	nt.)
	■ No					
			ed by the exemption w	ithin 1	,215 days before you filed this case?	?
	☐ No					

☐ Yes

Case 3:1	L8-bk-3358.	1 Doc 1 Filed 11. Documer		red 11/27/18 1 of 56	l1:10:19 Des	c Main
Fill in this information	n to identify yo					
Debtor 1 C	helsea Lynn E	Blundell				
	rst Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) Fi	rst Name	Middle Name	Last Name		-	
United States Bankrup	otcy Court for the	: SOUTHERN DISTRICT C	OF OHIO			
Case number						
(if known)					☐ Chec	k if this is an
					amen	ided filing
Official Form 10	06D					
		Who Have Clair	ns Secured	by Propert	V	12/15
		If two married people are filing t				ation. If more space
		out, number the entries, and atta				
. Do any creditors have	claims secured b	y your property?				
☐ No. Check this	box and submit	his form to the court with your	other schedules. Yo	u have nothing else t	o report on this form.	
Yes. Fill in all o	of the information	below.				
Part 1: List All Sec	cured Claims					
		more than one secured claim, list t		Column A	Column B	Column C
		s a particular claim, list the other crical order according to the creditor		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Capital One A	uto Finance	Describe the property that sec	cures the claim:	value of collateral. \$11,243.00	claim \$8,000.00	If any \$3,243.00
Creditor's Name	uto i mance	2010 Toyota RAV4		Ψ11,243.00	ψο,σσσ.σσ_	ψ3,243.00
Attus Dankusu						
Attn: Bankrup Po Box 30285	•	As of the date you file, the cla	im is: Check all that			
Salt Lake City		apply.  Contingent				
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that a				
Debtor 1 only		An agreement you made (su car loan)	ch as mortgage or secu	ured		
Debtor 2 only						
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lie				
At least one of the de		Judgment lien from a lawsuit				
☐ Check if this claim recommunity debt	elates to a	Other (including a right to off	rset) Vehicle Loa	<u>IN</u>		
	Opened					
	06/17 Last Active					
Date debt was incurred		Last 4 digits of accoun	t number 1001			
Add the deller water	of constant of the f	National A an this many Miles the	4 www.how.how.	¢44.24	12.00	

If this is the last page of your form, add the dollar value totals from all pages. \$11,243.00 Write that number here:

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 5.10	-DK-33301	DUCI	Docume			11/2//10 11. 56	10.13	Desc	, iviaii i
Fil	I in this information t	o identify your	case:							
De	btor 1 Che	lsea Lynn Blu	ındall							
00	First		Middle	Name	Last Name					
De	btor 2									
(Sp	ouse if, filing) First N	lame	Middle	Name	Last Name					
Un	ited States Bankruptc	Court for the:	SOUTHER	RN DISTRICT	OF OHIO					
Ca	se number									
(if k	nown)								•	if this is an led filing
Sc	ficial Form 106 hedule E/F: C	reditors W								12/15
nny Sch Sch eft. nam	as complete and accura executory contracts or edule G: Executory Coredule D: Creditors Who Attach the Continuation and case number (if I t. List All of Yor	unexpired leases stracts and Unexp Have Claims Sec n Page to this pag (nown).	that could re- ired Leases (Gured by Prope Je. If you have	sult in a claim. Official Form 1 erty. If more sp no informatio	. Also list executory 106G). Do not include pace is needed, copy	contracts any creat the Part	s on Schedule A/B: I ditors with partially s you need, fill it out,	Property (O secured cla number the	fficial For ims that a e entries in	m 106A/B) and on are listed in the boxes on the
		ur PRIORITY Un								
1.	Do any creditors have	priority unsecure	d ciaims agai	nst you?						
	No. Go to Part 2.									
	Yes.									
2.	List all of your priority identify what type of clai possible, list the claims Part 1. If more than one	m it is. If a claim ha in alphabetical orde	as both priority er according to	and nonpriority the creditor's n	amounts, list that clainame. If you have mor	m here ar	nd show both priority a	and nonprior	rity amount	ts. As much as
	(For an explanation of e	ach type of claim, s	see the instruct	tions for this for	m in the instruction bo	ooklet.)				
							Total claim	Priority amount		Nonpriority amount
2.1	City of Vandal	ia	ı	Last 4 digits of	f account number		\$60.95		\$60.95	\$0.00
	Priority Creditor's N				_				Ψ00.00	
	333 James Bo		'	When was the	debt incurred?			_		
	Vandalia, OH A Number Street City			As of the date	you file, the claim is:	Check a	II that apply			
	Who incurred the del	•		☐ Contingent	you mo, are claim to	. Onoon a	п пасарну			
	■ Debtor 1 only		_	☐ Unliquidated	1					
	Debtor 2 only		_	☐ Disputed						
	☐ Debtor 1 and Debto	or 2 only		-1	ITY unsecured claim	n:				
	_				upport obligations					
	At least one of the		51 I							
	☐ Check if this clain				certain other debts you					
	Is the claim subject t	o orrset?		_	eath or personal injury	wniie yo	u were intoxicated			
	■ No □ Yes		l	Other. Spec	ity					

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Debt	or 1 Chelsea Lynn Blundell		Case number (if known)	
2.2	State of Ohio Dept. of Taxation	Last 4 digits of account number	\$428.15	\$428.15 \$0.00
	Priority Creditor's Name  Compliance Division  P.O. Box 182402  Columbus, OH 43218-2402	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	□ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government	
	Is the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxicated	
	■ No	Other. Specify		
	Yes	School Distri	ct Taxes	
<b>4. L</b> u th	Yes.  ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do not list claims already	y included in Part 1. If more
•	u			Total claim
4.1	AmeriCredit/GM Financial	Last 4 digits of account number	8096	\$3,875.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 183853 Arlington, TX 76096	When was the debt incurred?	Opened 05/15 Last Active 10/18	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d alaims.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a ciaim:	
	☐ Check if this claim is for a community debt	Obligations arising out of a sepa	ration agreement or divorce that you did n	ot
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Lease		

Case 3:18-bk-33581 Doc 1 Filed 11/27/18 Entered 11/27/18 11:10:19 Desc Main Page 20 of 56 Case number (if known) Document Debtor 1 Chelsea Lynn Blundell 4.2 \$515.00 Capital One Last 4 digits of account number 6662 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/10 Last Active Po Box 30285 When was the debt incurred? 09/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 \$4,912.00 **Cavalry Portfolio Services** Last 4 digits of account number 1243 Nonpriority Creditor's Name Opened 03/18 Last Active Po Box 27288 When was the debt incurred? 06/17 Tempe, AZ 85285 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Citibank** Other, Specify **Cavalry Portfolio Services** Last 4 digits of account number 4750 \$1,553.00 Nonpriority Creditor's Name Opened 03/17 Last Active Attn: Bankruptcy Department 500 Summit Lake Ste 400 When was the debt incurred? 07/16 Valhalla, NY 10595 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

4.4

Who incurred the debt? Check one.

■ Debtor 1 only Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

 $\square$  Check if this claim is for a community debt

Is the claim subject to offset?

■ No ☐ Yes ☐ Contingent

☐ Unliquidated ☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collection Attorney Synchrony Bank

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Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Collection Attorney Orthopedic Asso ☐ Yes

Page 22 of 56 Case number (if known) Document Debtor 1 Chelsea Lynn Blundell 4.8 \$1,180.00 Choice Recovery Last 4 digits of account number 9835 Nonpriority Creditor's Name 1550 Old Henderson Road Opened 11/16 Last Active Suite 100 When was the debt incurred? 12/15 Columbus, OH 43220 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Collection Attorney Greater Dayton ☐ Yes 4.9 **Comenity Bank/Victoria Secret** Last 4 digits of account number 6706 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept Opened 11/11 Last Active Po Box 182125 When was the debt incurred? 6/18/16 Columbus, OH 45318 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.1 Credence 3714 \$477.47 Last 4 digits of account number Nonpriority Creditor's Name 17000 Dallas Parkway When was the debt incurred? Suite 204 Dallas, TX 75248 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Official Form 106 E/F

debt

■ No

☐ Yes

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for DIRECTV LLC

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 23 of 56 Debtor 1 Chelsea Lynn Blundell ase number (if known) 4.1 Dept of Ed / 582 / Nelnet 5007 \$1,318.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Opened 10/18 Last Active Po Box 82505 When was the debt incurred? 10/31/18 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept of Ed / 582 / Nelnet 4907 \$1,032.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Claims Opened 10/18 Last Active Po Box 82505 When was the debt incurred? 10/31/18 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Dept of Ed / 582 / Nelnet 1207 \$7,278.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Opened 10/17 Last Active Po Box 82505 When was the debt incurred? 10/31/18 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

Student loans

☐ Other. Specify

report as priority claims

debt

No ☐ Yes

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Document Page 24 of 56 Debtor 1 Chelsea Lynn Blundell ase number (if known) 4.1 Dept of Ed / 582 / Nelnet 1107 \$5,500.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 10/17 Last Active 121 S 13th St When was the debt incurred? 10/31/18 Lincoln, NE 68508 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept of Ed / 582 / Nelnet 8107 \$7,494.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 09/16 Last Active Attn: Claims Po Box 82505 When was the debt incurred? 10/31/18 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 Dept of Ed / 582 / Nelnet 8007 \$5,500.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Claims Opened 09/16 Last Active Po Box 82505 When was the debt incurred? 10/31/18 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another

☐ Yes

debt

■ No

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Educational

Student loans

☐ Other. Specify

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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4.1 7	Dept of Ed / 582 / Nelnet	Last 4 digits of account number	8005	\$6,686.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505	When was the debt incurred?	Opened 12/15 Last Active 10/31/18	
	Lincoln, NE 68501  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts	
	i res	Educationa		
		Luucationa		
4.1 8	Dept of Ed / 582 / Nelnet  Nonpriority Creditor's Name	Last 4 digits of account number	7905	\$4,500.00
	Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 12/15 Last Active 10/31/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	
4.1 9	Dept of Ed / 582 / Nelnet	Last 4 digits of account number	4211	\$10,618.00
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 01/13 Last Active 10/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	<ul><li>Student loans</li><li>Obligations arising out of a sepa</li></ul>	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	· ,	
	□ Yes	Other. Specify		
	Li res	Educationa		

Document Page 26 of 56 Debtor 1 Chelsea Lynn Blundell ise number (if known) 4.2 **Direct TV** \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Claims When was the debt incurred? P.O. Box 6550 Englewood, CO 80155 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify NOTICE 4.2 **Discover Financial** 5418 \$697.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/14 Last Active Po Box 3025 When was the debt incurred? 10/17 New Albany, OH 43054 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit Card Other. Specify 4.2 \$584.06 FBCS, Inc. 8425 Last 4 digits of account number Nonpriority Creditor's Name 330 S. Warminster Road When was the debt incurred? Suite 353 Hatboro, PA 19040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

T Yes

report as priority claims

□ Debts to pension or profit-sharing plans, and other similar debts
■ Other. Specify Collection for Buckeye Ambulance

Is the claim subject to offset?

Debtor 1 Chelsea Lynn Blundell Page 27 of 56
Case number (if known)

4.2 3	G. L. A. Collection Company	Last 4 digits of account number	9146	\$1,346.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 588	— When was the debt incurred?	Opened 07/15 Last Active 01/15	
	Greensburg, IN 47240	_		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other Specify Collection Serv Llc	Attorney Integrity Ambulance	
4.2 4	JP Recovery Services, Inc.	Last 4 digits of account number	2926	\$306.74
	Nonpriority Creditor's Name P.O. Box 16749 Rocky River, OH 44116	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharir		
	Yes	Other. Specify Collection	for Upper Valley Med Ctr	
4.2 5	Kohls/Capital One	Last 4 digits of account number	7878	\$372.00
	Nonpriority Creditor's Name Kohls Credit Po Box 3120 Milwaukee, WI 53201	When was the debt incurred?	Opened 04/11 Last Active 07/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	report as priority claims  Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc	••	
	□ res	Other. Specify	COUNT	

Document Page 28 of 56 Debtor 1 Chelsea Lynn Blundell ise number (if known) 4.2 Krishna K. Velayudhan \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Levy & Associates, LLC When was the debt incurred? 4645 Executive Drive Columbus, OH 43220 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts NOTICE ☐ Yes Other. Specify - Attorney for Cavalry SPV I, LLC 4.2 Petland/Comenity \$0.00 1276 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/11 Last Active Po Box 183043 When was the debt incurred? 7/06/12 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.2 Portfolio Recovery 0085 \$407.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/17 Last Active Po Box 41021 When was the debt incurred? 03/16 Norfolk, VA 23541 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt

☐ Yes

■ No

report as priority claims

Other. Specify Bank

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

**Factoring Company Account Synchrony** 

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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4.2 9	Southwest ENT	Last 4 digits of account number		\$0.00			
	Nonpriority Creditor's Name 1222 S. Patterson Blvd Dayton, OH 45402	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts				
	□Yes	Other. Specify NOTICE					
4.3	Syncb/hhgreg	Last 4 digits of account number	2155	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 07/11 Last Active 9/29/16				
	Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Charge Account					
4.3	Synchrony Bank/ JC Penneys	Last 4 digits of account number	1529	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 4/12/11 Last Active 8/20/14				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Charge Acc					

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Synchrony Bank/Old Navy	Last 4 digits of account number	0085	\$0
Nonpriority Creditor's Name Attn: Bankruptcy Dept	_	Opened 12/12 Last Active	
Po Box 965060 Orlando, FL 32896	When was the debt incurred?	03/16	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	ı	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 489.10
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 489.10
	6f.	Student loans	6f.	\$ Total Claim 49,926.00
Total claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that		 
	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 23,640.57
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 73,566.57

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:		
Debtor 1	Chelsea Lynn Blu	ındell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				☐ Check

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Americredit/GM Financial
P.O. Box 183853
Arlington, TX 76096

State what the contract or lease is for
2015 Chevrolet Cruze Vehicle Lease

		Docume	nt Page 32 d	of 56
Fill in this	information to identify yo	ur case:		
Debtor 1	Chelsea Lynn I	Blundell		
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	<del></del>
United Sta	tes Bankruptcy Court for the	SOUTHERN DISTRICT	OF OHIO	
Case num	her			
(if known)				☐ Check if this is an amended filing
Officia	l Form 106H			
	lule H: Your Co	debtors		12/15
501100	idic III. I dai do	debiois		12/13
our name	and case number (if know	(If you are filing a joint case,		to this page. On the top of any Additional Pages, write as a codebtor.
<b>=</b>				
■ No □ Yes	3			
		rou lived in a community pr na, Nevada, New Mexico, Pu		ry? (Community property states and territories include ington, and Wisconsin.)
■ No.	Go to line 3.			
☐ Yes	s. Did your spouse, former sp	oouse, or legal equivalent live	e with you at the time?	
in line Form out Co	2 again as a codebtor onl 106D), Schedule E/F (Offic olumn 2.	y if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State an	d ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			<u> </u>
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	

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Sill	in this information to ide	entify your ca	ace.					1				
			n Blundell									
	btor 2						_					
Uni	ited States Bankruptcy C	Court for the	: SOUTHERN DISTRIC	T OF OHIO								
	se number									ed filing ent showir	ng postpetition ollowing date:	
<u>O</u>	fficial Form 10	<u>)61</u>						Ī	MM / DD/ \	YYYY		
S	chedule I: Yo	ur Inco	ome									12/15
sup spo atta	plying correct informa use. If you are separat	tion. If you ed and you this form. (	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and the you, do not	your spo include i	use nfor	is liv mati	ing with	n you, incl it your sp	lude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your employminformation.	ent		Debtor 1					Debtor :	2 or non-f	iling spouse	
	If you have more than		Employment status	■ Employed				☐ Employed				
	attach a separate pag information about add		Employment status	☐ Not emplo	yed				□ Not e	employed		
	employers.		Occupation									
	Include part-time, seas self-employed work.	sonal, or	Employer's name	Champaigr Services, I		ntia	I					
	Occupation may included or homemaker, if it ap		Employer's address	1150 Scioto Suite100 Urbana, Ol								
			How long employed t	here? 1 y	/ear				_			
Pa	rt 2: Give Details	About Mon	thly Income									
	imate monthly income use unless you are sepa		ate you file this form. If	you have nothin	g to repo	rt for	any	line, writ	e \$0 in the	space. In	clude your no	n-filing
	ou or your non-filing spou e space, attach a separa		ore than one employer, co	ombine the infor	mation fo	r all e	empl	oyers for	that perso	on on the li	ines below. If	you need
								For De	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the monthle		e.	2.	\$	2	2,600.00	\$	N/A	
3.	Estimate and list mo	nthly overti	ime pay.			3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inco	me. Add lin	ne 2 + line 3.			4.	\$	2,6	00.00	\$	N/A	

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	Chelsea Lynn Blundell		Case	number ( <i>if known</i> )				
			For	Debtor 1		Debtor :		
Co	py line 4 here	4.	\$	2,600.00	\$	9	N/A	_
5. <b>Li</b> s	st all payroll deductions:							
5. <b>Li</b> . 5a		5a.	\$	621.01	\$		N/A	
5b	· · · · · · · · · · · · · · · · · · ·	5b.		0.00	\$		N/A	_
5c	•	5c.	- :	0.00	\$		N/A	
5d	·	5d.	_ :	0.00	\$		N/A	_
5e	. Insurance	5e.	\$	0.00	\$		N/A	_
5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	_
5g		5g.	\$	0.00	\$		N/A	_
5h	Other deductions. Specify:	_ 5h	+ \$	0.00	+ \$		N/A	_
6. <b>A</b> c	ld the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	621.01	\$		N/A	-
7. <b>C</b> a	lculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,978.99	\$		N/A	_
8. <b>Li</b> s 8a	st all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		N/A	
8b	. Interest and dividends	8b.	\$	0.00	\$		N/A	
8c	<ul> <li>Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</li> </ul>	8c.	\$	0.00	\$		N/A	_
8d	. ,	8d.	\$	0.00	\$		N/A	
8e	•	8e.	\$	0.00	\$		N/A	_
8f. 8g	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	_ 8f. 8g.	\$	0.00	\$		N/A N/A	_
8h		8h	_	0.00			N/A	_
On		_ 011.	· —	0.00	_		11//	-
9. <b>A</b> c	ld all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$		N/A	<u> </u>
40 0-	Jacobsta manufally in source Add Fine 7 y Fine O	. [		1 070 00		N1/A	•	4 070 00
	Ilculate monthly income. Add line 7 + line 9.  Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.   \$	·	1,978.99 + \$_		N/A	= \$ _	1,978.99
		. ∟						
Ind oth Do	ate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your ner friends or relatives.  In not include any amounts already included in lines 2-10 or amounts that are not a secify:	deper	•	•		chedule 11.		0.00
W	Id the amount in the last column of line 10 to the amount in line 11. The restrict that amount on the Summary of Schedules and Statistical Summary of Certain plies					12.	\$	1,978.99
13. <b>D</b> o	you expect an increase or decrease within the year after you file this form?	?					Combin monthl	ned y income
	No.							

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	in this informat	tion to identify ye	21.1. 22.22.						
	in this informat	tion to identify yo	our case.						
Deb	tor 1	Chelsea Lyn	n Blunde	ell			eck if this is:		
Deb	tor 2						An amended filin	g owing postpetition chapter	
	ouse, if filing)					Ц		of the following date:	
Unite	ed States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	<u> </u>		MM / DD / YYYY		
l	e number nown)								
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your	Exper	ses				12 <i>/</i> *	15
Be a info nun	as complete a ormation. If mon mber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta ry questio	If two married people ar ch another sheet to this					
Part 1.	Is this a join	ibe Your House	enold						_
٠.	No. Go to								
	_		in a sonar	ate household?					
	□ res. <b>Doe</b> :		iii a sepai	ate nousenoiu:					
			st file Offici	al Form 106J-2, Expenses	for Separate House	<i>hold</i> of De	ebtor 2.		
2					,				
2.	•	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state dependents i							□ No □ Yes	
	dependents	names.						_ □ Yes □ No	
								□ No □ Yes	
								_ □ No	
								□ Yes	
								_ D No	
								☐ Yes	
3.		enses include		No			_	_	
		f people other ti d your depende	han $_{m \Box}$	Yes					
	yoursen and	a your depende	IIIS f						
Par		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp				napter 13 case to report of the form and fill in the	ı
				government assistance i					
(Off	ficial Form 10	6I.)					Your ex	penses	
4.		r home owners		ses for your residence. I	nclude first mortgage	4.	\$	600.00	
	If not includ	ed in line 4:							
		state taxes				4a.	\$	0.00	
		rty, homeowner's	s. or renter	's insurance		4a. 4b.		0.00	
		•		ipkeep expenses		4c.	·	0.00	
		owner's associat				4d.	·	0.00	
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00	

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Depto	Chelsea Lynn Blundell	Case nun	nber (if known)	
6. <b>L</b>	Jtilities:			
	Sa. Electricity, heat, natural gas	6а	. \$	150.00
	6b. Water, sewer, garbage collection		. \$	40.00
	Sc. Telephone, cell phone, Internet, satellite, and cable		. \$	50.00
	6d. Other. Specify:		. \$	0.00
	Food and housekeeping supplies	7.	· -	400.00
	Childcare and children's education costs	8.	·	
			. \$ . \$	0.00
	Clothing, laundry, and dry cleaning Personal care products and services			20.00
	•		. \$	25.00
	Medical and dental expenses		. \$	0.00
	<b>Fransportation.</b> Include gas, maintenance, bus or train fa Do not include car payments.	re.	. \$	150.00
	Entertainment, clubs, recreation, newspapers, magazi		· <u> </u>	25.00
	Charitable contributions and religious donations		. \$ . \$	
	•	14.	. Ф	0.00
-	<b>nsurance.</b> Do not include insurance deducted from your pay or incluc	led in lines 4 or 20		
	50 not include insurance deducted from your pay of includ 15a. Life insurance	15a.	. \$	0.00
	15b. Health insurance	15b.		0.00
-	15c. Vehicle insurance	15b. 15c.	· ——	100.00
	15d. Other insurance. Specify:	15d.	· -	
	<b>Faxes.</b> Do not include taxes deducted from your pay or inc		. Ф	0.00
	Faxes. Do not include taxes deducted from your pay of inc Specify:		. \$	0.00
	nstallment or lease payments:		. Ψ	0.00
	17a. Car payments for Vehicle 1	17a.	\$	367.22
	17b. Car payments for Vehicle 2	17b.		0.00
	17b. Cal payments for vehicle 2	176. 17c.	·	0.00
		17 <i>c.</i>	· —	
	17d. Other. Specify:		. Ф	0.00
	Your payments of alimony, maintenance, and support deducted from your pay on line 5, <i>Schedule I, Your Inc</i>		. \$	0.00
	Other payments you make to support others who do n	ome (omolai i omi iooi).	\$	0.00
	Specify:	19.	·	0.00
	Other real property expenses not included in lines 4 or			
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	· -	0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
			. φ . +\$	
1. <b>C</b>	Other: Specify:	21.	. +>	0.00
2. <b>(</b>	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	1,927.22
	22b. Copy line 22 (monthly expenses for Debtor 2), if any,	from Official Form 106J-2	\$	,
	22c. Add line 22a and 22b. The result is your monthly exp		\$	1,927.22
_				1,321.22
	Calculate your monthly net income.			
2	23a. Copy line 12 (your combined monthly income) from	Schedule I. 23a.	. \$	1,978.99
2	23b. Copy your monthly expenses from line 22c above.	23b.	\$	1,927.22
				,
2	23c. Subtract your monthly expenses from your monthly	income.		E4 77
	The result is your monthly net income.	23c.	. [\$	51.77
	Do you expect an increase or decrease in your expens			
	For example, do you expect to finish paying for your car loan within modification to the terms of your mortgage?	ine year or do you expect your mortgage	payment to inc	crease or decrease because of
_	_			
n	or example, do you expect to firmsh paying for your car loan within modification to the terms of your mortgage?  ■ No.  ■ Yes Explain here:	The year or do you expect your mortgage	payment to inc	rease of decrease becaus

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Fill in this inform	nation to identify your	case:				
Debtor 1	Chelsea Lynn Blu	ndell				
	First Name	Middle Name	Las	t Name		
Debtor 2	First Name	Middle Nove	Lan	4 Name		
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO			
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Form	106Daa					
Official Form						
Declarati	ion About a	n Individual	Debto	or's Sched	lules	12/15
If two married peo	ople are filing together	, both are equally respo	nsible for s	upplying correct info	ormation.	
You must file this	form whenever vou fi	e bankruptcy schedules	s or amende	ed schedules. Making	a a false stat	ement, concealing property, or
obtaining money	or property by fraud ir	connection with a bank				00, or imprisonment for up to 20
years, or both. 18	U.S.C. §§ 152, 1341, 1	519, and 3571.				
Sign	Below					
Olgii						
Did you pay	or agree to pay some	one who is NOT an attor	rney to help	you fill out bankrup	tcy forms?	
■ No						
☐ Yes. N	ame of person				Attach Ban	nkruptcy Petition Preparer's Notice,
<u> </u>						n, and Signature (Official Form 119)
Under nenal	ty of perjury I declare	that I have read the sum	mary and s	chadules filed with t	his doclarati	on and
	true and correct.	mat i mave read the sum	illiary aria 3	chedules filed with t	ins acciarati	on and
X /s/ Chal	sea Lynn Blundell		х			
	a Lynn Blundell			Signature of Debtor 2	2	
	e of Debtor 1			2.3	=	
-						

Date

Date November 27, 2018

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FII	l in this inform	nation to identify you	r case:			
De	btor 1	Chelsea Lynn B				
De	btor 2	First Name	Middle Name	Last Name		
1 -	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT C	OF OHIO		
Ca	se number					
	nown)					Check if this is an
						amended filing
~	· · · · -	4.07				
	ficial Fo					
St	atement	of Financial	Affairs for Individ	duals Filing for E	sankruptcy	4/1
			ible. If two married people a attach a separate sheet to			
		n). Answer every que			y additional pagoo, whic	your name and odde
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	r current marital statu	ıs?			
		ried				
_						
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	□ No					
	Yes. Lis	t all of the places you	ived in the last 3 years. Do no	ot include where you live now	٧.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	ldress:	Dates Debtor 2
	109 Brethr	en Drive	lived there From-To:	☐ Same as Debtor	1	lived there  ☐ Same as Debtor 1
		lill, OH 45359		Game as Debior	I	From-To:
	975 Taylor	sview Drive	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1
	Vandalia, (	OH 45377				From-To:
3.	Within the la	st 8 vears. did vou e	ver live with a spouse or leg	ial equivalent in a commur	nity property state or terr	itory? (Community property
			lifornia, Idaho, Louisiana, Nev			
	■ No					
	☐ Yes. Ma	ake sure you fill out Sca	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	ır İncome			
·u	Ехріан					
4.			mployment or from operatin ou received from all jobs and a			alendar years?
			have income that you receive			
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Chelsea Lynn Blundell

				Debtor 1					Debtor 2		
				Sources of i Check all tha		(befo	ss income ore deductions ar usions)	nd	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		1 of currer iled for ban	nt year until kruptcy:	■ Wages, co			\$26,571.	25	☐ Wages, com bonuses, tips	missions,	
				☐ Operating	a business				☐ Operating a	business	
For last calendar year: (January 1 to December 31, 2017)		■ Wages, co	es, commissions, s, tips		00	☐ Wages, commissions, bonuses, tips					
				☐ Operating	a business				☐ Operating a	business	
		dar year be December		■ Wages, co			\$27,709.	00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating	a business				☐ Operating a business		
	winnings.  List each s	f you are fili	ng a joint cas	se and you have	e income that y	you rece	eived together, lis	st it on	ly once under De	ebtor 1.	d gambling and lottery
				Debtor 1					Debtor 2		
				Sources of in Describe belo		each (befo	ss income from a source ore deductions ar usions)	nd	Sources of inc Describe below.		Gross income (before deductions and exclusions)
Par	t 3: List	Certain Pa	vments You	Made Before	You Filed for		,				
6.	Are either ☐ No.	Neither Deindividual puring the No.	ebtor 1 nor Deprimarily for a 90 days before Go to line 7 List below 6 paid that crunot include	personal, fami ore you filed for each creditor to editor. Do not in payments to an	rimarily consulty, or househo bankruptcy, di whom you painclude paymern attorney for ti	umer de old purpo id you pa id a total nts for do his bank	ebts. Consumer of se."  ay any creditor a  I of \$6,425* or momestic support of cruptcy case.	total of	of \$6,425* or mor one or more pay tions, such as ch	re? ments and th ild support ar	(8) as "incurred by an the total amount you and alimony. Also, do
	■ Yes.	Debtor 1 c	r Debtor 2 o	r both have p	rimarily consu	umer de	bts.		r after the date o	·	
		_	·	·	Dankruptcy, di	iu you pa	ay any creditor a	เบเลเ	of \$600 or more?		
		■ No.	Go to line 7					_			
		□ Yes	include pay		estic support o				he total amount of and alimony.		creditor. Do not noclude payments to an
	Creditor'	s Name and	l Address	Da	ates of payme	ent	Total amoun		Amount you still owe	Was this p	ayment for

Case 3:18-bk-33581 Filed 11/27/18 Entered 11/27/18 11:10:19 Desc Main Page 40 of 56 Document Chelsea Lynn Blundell ase number (if known) Debtor 1 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Cavalry SPV I, LLC v. Chelsea Garnishment **Miami County Municipal** Pending Blundell Court □ On appeal 2017 CVF 01860 □ Concluded -\$1547.40 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο

Doc 1

Yes

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Case number (if known) Document Debtor 1 Chelsea Lynn Blundell

Par	t 5: List Certain Gifts and Contributions	S		
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$60 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co	uptcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	,	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling?  No Yes. Fill in the details.	otcy or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or p	otcy, did you or anyone else acting on your behalf pay or reparing a bankruptcy petition? reparers, or credit counseling agencies for services required		rty to anyone you
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Miller Luring Venters & Wesner Co. LPA 314 W. Main Street Troy, OH 45373	Attorney Fee: \$1065.00 Court Filing Cost: \$335.00 Credit Report: \$40.00	11/13/18	\$1,440.00
17.		otcy, did you or anyone else acting on your behalf pay of itors or to make payments to your creditors?  you listed on line 16.	or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Chelsea Lynn Blundell

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already  No  Yes. Fill in the details.	siness or financial affa le as security (such as t	airs? the granting of a					
	Person Who Received Transfer Address	Description and v		paymo	ibe any property or ents received or debts n exchange	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No		y property to a	self-settle	d trust or similar device o	of which you are a		
	<ul> <li>☐ Yes. Fill in the details.</li> <li>Name of trust</li> <li>Description and value of the property transferred</li> <li>Date Transfer was</li> </ul>							
	Tallio of tract	2000 i pilon ana	and or the prop	porty traile	71011 Ou	made		
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposi	Boxes, and St	orage Unit	s			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accoun	nts; certificates	of deposi				
	Yes. Fill in the details.							
		Last 4 digits of account number	Type of accou	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, ar	ny safe dep	oosit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your	home within 1	year befor	e you filed for bankrupto	y?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control fo	or Someone Else						
23.	Do you hold or control any property that som for someone.	eone else owns? Incl	ude any propert	y you bori	rowed from, are storing fo	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Par	t 10: Give Details About Environmental Infor	mation						
For	the purpose of Part 10, the following definition	ns apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Case number (if known) Document

Debtor 1 Chelsea Lynn Blundell

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.									
Rep	port all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.							
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any	y release of hazardous material?								
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admini	istrative proceeding under any envi	ronmental law? Include settlements a	nd orders.						
	■ No									
	Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Pai	rt 11: Give Details About Your Business or Cor	nnections to Any Business								
			y of the following connections to any	husiness?						
21.	ithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	_	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting of	•								
	No. None of the above applies. Go to Part	. ,								
	Yes. Check all that apply above and fill in									
		escribe the nature of the business	Employer Identification number							
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper	Do not include Social Security n	umber or ITIN.						
		amo or accountant or bookscope.	Dates business existed							
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement t	o anyone about your business? Inclu	de all financial						
	No									
	Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 3:18-bk-33581 Doc 1 Filed 11/27/18 Entered 11/27/18 11:10:19 Desc Main Page 44 of 56 Case number (if known) Document

Debtor 1 Chelsea Lynn Blundell

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Chelsea Lynn Blundell Signature of Debtor 2 Chelsea Lynn Blundell Signature of Debtor 1 Date November 27, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Ohio

In re	Chelsea Lynn Blundell		Case No	).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing one rendered on behalf of the debtor(s) in contemplation of contemplation.	of the petition in bankruptcy	, or agreed to be pa	id to me, for service	
	For legal services, I have agreed to accept		\$	1,065.00	
	Prior to the filing of this statement I have received		\$	1,065.00	
	Balance Due			0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compens	sation with any other persor	n unless they are me	embers and associate	es of my law firm.
١	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				my law firm. A
<b>5.</b> ]	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspec	ets of the bankruptc	y case, including:	
t c	a. Analysis of the debtor's financial situation, and rendering.  Preparation and filing of any petition, schedules, statem.  Representation of the debtor at the meeting of creditors.  [Other provisions as needed]  Per Contract	ent of affairs and plan which	h may be required;	-	oankruptcy;
6. I	By agreement with the debtor(s), the above-disclosed fee de Per the Legal Representation Agreement, by the Legal Representation Agreement, "to additional representation arises. The hour	"the Contract," the initia the Contract," shall be o	al retainer for se determined at su	ch time as the no	eed for
	,	CERTIFICATION			
	certify that the foregoing is a complete statement of any analysis and any analysis of the statement of of the statem	greement or arrangement fo	or payment to me fo	r representation of t	he debtor(s) in
N	ovember 27, 2018	/s/ Christopher L	Wesner		
_	ate	Christopher L. W	Vesner 0082699		
		Signature of Attorn Miller, Luring, Ve 314 W. Main Stre	enters & Wesner	Co., LPA	
		Troy, OH 45373			
		937-339-2627 Fa			
		Name of law firm	- giliali.com		

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Fill in th	is information to identify your case:					irected in this form an	d in Form
Debtor	Chelsea Lynn Blundell		122	2A-1Supp			
Debtor				1 Ther	e is no pres	umption of abuse	
(Spouse,	<b>5</b> ,		.	_	•	•	matical of obvious
United :	States Bankruptcy Court for the: Southern District of	f Ohio	'			o determine if a presu nade under <i>Chapter</i> 7	•
Case n	umber			Calo	culation (Off	icial Form 122A-2).	
(if known)			]			does not apply now by service but it could a	
				☐ Check	if this is a	n amended filing	
Offic	ial Form 122A - 1						
Cha	oter 7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/1
attach a : case nun	mplete and accurate as possible. If two married people a separate sheet to this form. Include the line number to who wher (if known). If you believe that you are exempted from a military service, complete and file Statement of Exempted Calculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies. On se you do	the top of an	ny additional pages, wri narily consumer debts o	te your name and or because of
	hat is your marital and filing status? Check one on	lv.					
	Not married. Fill out Column A, lines 2-11.	ıy.					
	Married and your spouse is filing with you. Fill ou	t hoth Columns	Δ and R lines	2-11			
	Married and your spouse is NOT filing with you.			2-11.			
	☐ Living in the same household and are not lega	•	•	lumns A a	nd B. lines 2	2-11.	
	☐ Living separately or are legally separated. Fill of				,		u declare under
	penalty of perjury that you and your spouse are le living apart for reasons that do not include evadir	egally separated	d under nonban	kruptcy la	w that applie	es or that you and you	
101(1 the 6	the average monthly income that you received from all (0A). For example, if you are filing on September 15, the 6-m months, add the income for all 6 months and divide the total ses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August de any inco	31. If the amo	ount of your monthly incor ore than once. For exam	ne varied during ble, if both
				Column / Debtor 1		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, yroll deductions).	and commissio	ons (before all	\$	2,675.90	\$	
	<b>imony and maintenance payments.</b> Do not include olumn B is filled in.	payments from	a spouse if	\$	0.00	\$	
<b>of</b> fro an	I amounts from any source which are regularly pa you or your dependents, including child support. on an unmarried partner, members of your household d roommates. Include regular contributions from a sp ed in. Do not include payments you listed on line 3.	Include regular, your depender	contributions nts, parents,	\$	0.00	\$	
5. <b>N</b> €	et income from operating a business, profession,						
_			tor 1				
	oss receipts (before all deductions)	\$ 0.00 -\$ 0.00					
	dinary and necessary operating expenses at monthly income from a business, profession, or fare	0.00	Copy here ->	\$	0.00	\$	
	et income from rental and other real property			Ť		*	
0	and only is an property	Deb	tor 1				
Gr	oss receipts (before all deductions)	\$0.00					
Or	dinary and necessary operating expenses	-\$ 0.00					
Ne	et monthly income from rental or other real property	\$0.00	Copy here ->	\$	0.00	\$	
7. <b>In</b> t	terest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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or 1 Chelsea Lynn Blundell		Case no	umber (if known)			
		Columi Debtor		Column Debtor 2 non-filin		
Unemployment compensation		\$	0.00	\$		
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a benefit	under				
For you S	0.00	<u>)                                    </u>				
For your spouse		_				
<b>Pension or retirement income.</b> Do not include any a benefit under the Social Security Act.	mount received that was	a \$	0.00	\$		
Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below.	Security Act or payments imanity, or international o	r				
·		\$	0.00	\$		
		\$	0.00	\$		
Total amounts from separate pages, if any.		+ \$	0.00	\$		
. Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to		\$2,675.9	<b>o</b> + s _			2,675.90
					Total	current monthl
Calculate your current monthly income for the yea 12a. Copy your total current monthly income from line	•	(	Copy line 11	here=>	\$	2,675.90
Multiply by 12 (the number of months in a year)					X	
12b. The result is your annual income for this part of the	ne form			1	2b. \$	32,110.80
Calculate the median family income that applies to	you. Follow these steps:					
Fill in the state in which you live.	ОН					
Fill in the number of people in your household.	1					
Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	online using the link spe	cified in the se	parate instruc		3. \$	48,441.00
How do the lines compare?						
14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, chec	ck box 1, There	e is no presun	nption of ab	ouse.	
14b.  Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2, 7	he presumption	on of abuse is	determined	d by Form 1	22A-2.
3: Sign Below						
By signing here, I declare under penalty of perjur	y that the information on t	his statement	and in any att	achments i	s true and o	orrect.
X /s/ Chelsea Lynn Blundell Chelsea Lynn Blundell						
Signature of Debtor 1						
Date November 27, 2018						
MM / DD / YYYY						

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Debtor 1 Chelsea Lynn Blundell

Case number (if known)

### **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 05/01/2018 to 10/31/2018.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: CRSI

Income	by	Month:
--------	----	--------

6 Months Ago:	05/2018	\$2,387.41
5 Months Ago:	06/2018	\$2,340.26
4 Months Ago:	07/2018	\$2,405.07
3 Months Ago:	08/2018	\$4,116.43
2 Months Ago:	09/2018	\$2,406.25
Last Month:	10/2018	\$2,400.00
	Average per month:	\$2,675.90

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7:	Liquidation
(	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
,	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

Americredit/GM Financial P.O. Box 183853 Arlington, TX 76096

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services Po Box 27288 Tempe, AZ 85285

Cavalry Portfolio Services Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595

CBCS P.O. Box 163279 Columbus, OH 43216

Choice Recovery 1550 Old Henderson Road Suite 100 Columbus, OH 43220

Choice Recovery 1550 Old Henderson Road Suite 100 Columbus, OH 43220

Choice Recovery 1550 Old Henderson Road Suite 100 Columbus, OH 43220

City of Vandalia 333 James Bohanan Drive Vandalia, OH 45377

Comenity Bank/Victoria Secret Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 45318 Credence 17000 Dallas Parkway Suite 204 Dallas, TX 75248

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet 121 S 13th St Lincoln, NE 68508

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Dept of Ed / 582 / Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Direct TV Attn: Bankruptcy Claims P.O. Box 6550 Englewood, CO 80155 Discover Financial Po Box 3025 New Albany, OH 43054

FBCS, Inc. 330 S. Warminster Road Suite 353 Hatboro, PA 19040

G. L. A. Collection Company Attn: Bankruptcy Po Box 588 Greensburg, IN 47240

JP Recovery Services, Inc. P.O. Box 16749
Rocky River, OH 44116

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Krishna K. Velayudhan Levy & Associates, LLC 4645 Executive Drive Columbus, OH 43220

Petland/Comenity Attn: Bankruptcy Po Box 183043 Columbus, OH 43218

Portfolio Recovery Po Box 41021 Norfolk, VA 23541

Southwest ENT 1222 S. Patterson Blvd Dayton, OH 45402

State of Ohio Dept. of Taxation Compliance Division P.O. Box 182402 Columbus, OH 43218-2402

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Synchrony Bank/Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896